TO: Primary Care Providers, Infectious Disease Personnel, Urgent Care, ERs, Student

Health, and Public Health

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RE: Measles Outbreaks

DATE: <u>July 18, 2014</u>

Since January 1, 2014, the United States has had 566 reported patients with measles. Included in that number are 18 outbreaks in 20 states extending into the Midwestern states of Minnesota, Missouri, and Kansas. This is the highest number of cases since measles elimination was documented in the U.S. in 2000.

Measles is a highly contagious respiratory disease caused by a virus. The disease of measles and the virus that causes it share the same name. The disease is also called rubeola. The majority of the people who get measles are unvaccinated. Measles is still common in many parts of the world including some countries in Europe, Asia, the Pacific, and Africa. Travelers with measles continue to bring the disease into the U.S. Measles can spread when it reaches a community in the U.S. where groups of people are unvaccinated.

## **Advice for Travelers**

Measles is still common in other countries. From January 1 - May 20, 2014, about 31,508 suspected and 9,149 confirmed cases of measles have been reported in the Philippines. As of May 30, 22 U.S. travelers, mostly unvaccinated, who returned from the Philippines have become sick with measles. Before traveling internationally, make sure vaccinations are up to date.

Measles is relatively **uncommon** in Central and South America. CDC has not identified measles transmission as an issue with the recent immigration-related problems on our Southern border. <a href="http://www.who.int/immunization/monitoring\_surveillance/burden/vpd/surveillance\_type/active/measles\_monthlydata/en/">http://www.who.int/immunization/monitoring\_surveillance/burden/vpd/surveillance\_type/active/measles\_monthlydata/en/</a>

## **Clinical Presentation**

Many healthcare providers in the United States have never seen a patient with measles and might not recognize the signs and symptoms. Given the recent increase in US cases, healthcare providers need to be more alert than ever to the possibility of measles.

Measles should be considered in patients who:

- present with febrile rash illness and clinically compatible measles symptoms (cough, coryza [or runny nose] or conjunctivitis [pink eye]),
- recently traveled internationally or were exposed to someone who recently travelled, or
- have not been vaccinated against measles.

Healthcare providers should also consider measles when evaluating patients for other febrile rash illnesses, including Dengue and Kawasaki's Disease.

If you suspect measles, do the following immediately:

- 1. Isolate patients to avoid disease transmission.
- 2. Report the suspect measles case to your local or state health department.
- 3. Obtain specimens for testing from patients with suspected measles, including viral specimens.

Additional guidance for healthcare providers can be found at: <a href="http://www.cdc.gov/measles/hcp/index.html">http://www.cdc.gov/measles/hcp/index.html</a>. Also, see CDC's measles surveillance guidance: <a href="http://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html">http://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html</a>.

Please see the included map for Local Health Department contact numbers. Please note that as Sandhills is no longer a health department, public health issues in those counties should be reported to Nebraska Department of Health and Services.